## Application Number 09/869,513 TRANSMITTAL Filing Date 6/27/2001 **FORM** First Named Inventor Paul D. Franke 2154 Art Unit Examiner Name Mohammad A. Siddiqi (to be used for all correspondence after initial filing) Total Number of Pages in This Submission Attorney Docket Number 1762 - 010921

ENCLOSURES (check all that apply)									
Fee Transmittal F	Fee Transmittal Form		Drawing(s)		After Allowance communication to TC				
Fee Attache	ed	Licensing-related Pa		Papers	$\checkmark$	Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply		Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final	After Final		Petition to conver Provisional Appli	•		Proprietary Information			
Affidavits/o	declaration(s)		Power of Attorney Change of Corres Address			Status Letter			
Extension of Time Request			Terminal Disclair	ner		Other Enclosure(s) (please identify below):			
Express Abandon	Express Abandonment Request		Request for Refu	nd					
Information Disclosure Statement			CD, Number of C	CD(s)					
			Landscape T	able on CD					
Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application  Reply to Missing Parts Under 37 CFR 1.52 or 1.53			narks						
The Commissioner for Patents is hereby authorized to charge any additional fees or underpayment of fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 23-0650.									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name	Firm Name The Webb Law Firm								
Signature	Signature Maria								
Printed Name	Printed Name Nathan J. Prepelka								
Date December 12, 200		800	08 R		43,016	43,016			
CERTIFICATE OF TRANSMISSION / MAILING									
I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:									
Signature TWA / MULLI									
Typed or printed name Lisa A. Miller					Date	December 12, 2008			

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known									
FEE TRANSMITTAL	Application Number	09/869,513	13								
	Filing Date	6/27/2001									
For FY 2008	First Named Inventor	Paul D. Franke									
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Mohammad A. Side	mad A. Siddiqi								
TOTAL AMOUNT OF BANMENT (2) 225 00	Art Unit	2154	2021								
TOTAL AMOUNT OF PAYMENT (\$) 335.00	Attorney Docket	1762 - 010921									
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
FILING FEES SEARC		TION FEES		1							
		mall Entity	100 NO 100	. (0)							
Application Type Fee (\$) Fee (\$) Fee (\$)	<u>Fee (\$)</u> <u>Fee (\$)</u>	<u>Fee (\$)</u>	Fees Paid	1 (3)							
Utility 310 75 510	255 210	105	<del></del>								
Design 210 105 100	50 130	65	·····								
Plant 210 105 310	155 160	80	<b></b>								
Reissue 310 155 510	255 620	310									
Provisional 210 105 0	0 0	0									
2. EXCESS CLAIM FEES	•	•	S	mall Entity							
Fee Description Fee (\$)											
Each claim over 20 (including Reissues)											
Each independent claim over 3 (including Reissues)											
Multiple dependent claims	_	370	185								
	<u>Fee Paid (\$)</u>	<u>N</u>		endent Claims							
HP = highest number of total claims paid for, if greater than 20.	:		<u>Fee (\$)</u>	Fee Paid (\$)							
·	e (\$) Fee Paid (\$)		······································								
HP = highest number of independent claims paid for, if greater than 3.	**************************************										
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S)				Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity)	y discount)		<u>.</u>	_ vos a seru (U)							
Other (e.g., late filing surcharge): Appeal Brief (\$270); One-month Extension (\$65)											
SUBMITTED BY											
Signature	Registration No. (Attorney/Agent)	43,016 Telepho	ne 412-47	1-8815							
Name (Print/Type) Nathan J. Prepelka		Date	Decembe	r 12, 2008							